Debtor 1 **Rehan   Rehman**
First Name   Middle Name   Last Name

Case number *(if known)* **1-23-44680-jmm**

		Column A	Column B	Column C
Part 1:	**Additional Page**	**Amount of claim**	**Value of collateral**	**Unsecured**
	After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Do not deduct the value of collateral.	that supports this claim	portion If any

---

☐

Creditor's Name

Number   Street

_____

City   State   ZIP Code

Describe the property that secures the claim:

$_____ $_____ $_____

As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Who owes the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim relates to a community debt**

Nature of lien. Check all that apply.
☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset) _____

Date debt was incurred _____

Last 4 digits of account number ___ ___ ___ ___

☐

Creditor's Name

Number   Street

_____

City   State   ZIP Code

Describe the property that secures the claim:

$_____ $_____ $_____

As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Who owes the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim relates to a community debt**

Nature of lien. Check all that apply.
☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset) _____

Date debt was incurred _____

Last 4 digits of account number ___ ___ ___ ___

☐

Creditor's Name

Number   Street

_____

City   State   ZIP Code

Describe the property that secures the claim:

$_____ $_____ $_____

As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Who owes the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim relates to a community debt**

Nature of lien. Check all that apply.
☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset) _____

Date debt was incurred _____

Last 4 digits of account number ___ ___ ___ ___

Add the dollar value of your entries in Column A on this page. Write that number here: $_____

If this is the last page of your form, add the dollar value totals from all pages. Write that number here: $_____

Debtor 1   Rehan   Rehman   Case number (*if known*) 1-23-44680-jmm

First Name   Middle Name   Last Name

About Debtor 1:   About Debtor 2 (Spouse Only in a Joint Case):

Fill in this information to identify your case:

Debtor 1   Rehan   Rehman
            First Name   Middle Name   Last Name

Debtor 2
(Spouse, if filing) First Name   Middle Name   Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number   1-23-44680-jmm
(If known)

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims   12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1:	List All of Your PRIORITY Unsecured Claims

1. **Do any creditors have priority unsecured claims against you?**

   ☐ No. Go to Part 2.

   ☐ Yes.

2. **List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

   (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount

2.1 Sexton Intrests IV LTD
Priority Creditor's Name

7999 HANSEN Rd. STE 317
Number   Street

HOUSTON   TX   77061
City   State ZIP Code

Who incurred the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?
☐ No
☑ Yes

Last 4 digits of account number ___ ___ ___ ___

When was the debt incurred?   2023

As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☑ Disputed

Type of PRIORITY unsecured claim:
☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

Total claim $29062   Priority $8500   Nonpriority $20562

2.2 UNIVERSAL CAPITAL Recovery, LLC
Priority Creditor's Name

1800 West loop S STE 2100
Number   Street

HOUSTON   TX   77027
City   State ZIP Code

Who incurred the debt? Check one.
☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?
☐ No
☑ Yes

Last 4 digits of account number ___ ___ ___ ___

When was the debt incurred?   _____

As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☑ Disputed

Type of PRIORITY unsecured claim:
☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

Total claim $15000   Priority $15000   Nonpriority $00

Debtor 1 _____   Case number (if known)_____
        First Name   Middle Name   Last Name

Part 1:	Your PRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount

☐

_____
Priority Creditor's Name

_____
Number   Street

_____

_____
City   State   ZIP Code

Last 4 digits of account number ___ ___ ___ ___

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

$_____ $_____ $_____

Who incurred the debt? Check one.

☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No
☐ Yes

Type of PRIORITY unsecured claim:

☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

☐

_____
Priority Creditor's Name

_____
Number   Street

_____

_____
City   State   ZIP Code

Last 4 digits of account number ___ ___ ___ ___

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

$_____ $_____ $_____

Who incurred the debt? Check one.

☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No
☐ Yes

Type of PRIORITY unsecured claim:

☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

☐

_____
Priority Creditor's Name

_____
Number   Street

_____

_____
City   State   ZIP Code

Last 4 digits of account number ___ ___ ___ ___

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

$_____ $_____ $_____

Who incurred the debt? Check one.

☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No
☐ Yes

Type of PRIORITY unsecured claim:

☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

Debtor 1	Rehan	Rehman		Case number (if known)	1-23-44680-jmm
	First Name	Middle Name Last Name			

Part 2:   List All of Your NONPRIORITY Unsecured Claims

3. **Do any creditors have nonpriority unsecured claims against you?**

   ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

   ☑ Yes

4. **List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1

AFFIRM Inc.
Nonpriority Creditor's Name

30 Isabella St. 4th FL
Number   Street

Pittsburg   PA   15212
City   State   ZIP Code

Who incurred the debt? Check one.

☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No
☑ Yes

Last 4 digits of account number ___ ___ ___ ___

When was the debt incurred?   _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☑ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify _____

Total claim

$ 313.00

4.2

4 change Energy
Nonpriority Creditor's Name

P.O. Box 660361
Number   Street

DALLAS   TX   75266
City   State   ZIP Code

Who incurred the debt? Check one.

☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No
☑ Yes

Last 4 digits of account number ___ ___ ___ ___

When was the debt incurred?   _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☑ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify _____

$ 1650.00

4.3

CAPITAL ONE
Nonpriority Creditor's Name

P.O. Box 31293
Number   Street

SALT LAKE CITY UT   84131
City   State   ZIP Code

Who incurred the debt? Check one.

☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No
☑ Yes

Last 4 digits of account number ___ ___ ___ ___

When was the debt incurred?   _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☑ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify _____

$ 1300.00

Official Form 106E/F   Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1 ___Rehan_____ ___Rehman_____   Case number *(if known)* __1-23-44680-jmm__
     First Name   Middle Name   Last Name

Part 2:	Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.   **Total claim**

☐ CITY OF Pearland WATER Dept.
Nonpriority Creditor's Name
P.O. Box 2068 Pearland City
Number   Street   limit.
Pearland   Tx 77581
City   State   ZIP Code

Last 4 digits of account number __ __ __ __

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☑ Disputed

$ 1600.00

Who incurred the debt? Check one.
☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?
☐ No
☑ Yes

Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify_____

☐ DANIEL WOODS
Nonpriority Creditor's Name
10506 Mount Tipton
Number   Street
SAN ANTONIO Tx 78213
City   State   ZIP Code

Last 4 digits of account number __ __ __ __

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.
☐ Contingent
☑ Unliquidated
☐ Disputed

$ 315.00

Who incurred the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?
☐ No
☑ Yes

Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify_____

☐ Dept of ED Nelnet
Nonpriority Creditor's Name
Add not known.
Number   Street

City   State   ZIP Code

Last 4 digits of account number __ __ __ __

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.
☐ Contingent
☑ Unliquidated
☐ Disputed

$ 45000.00

Who incurred the debt? Check one.
☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?
☐ No
☑ Yes

Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify_____

Official Form 106E/F   **Schedule E/F: Creditors Who Have Unsecured Claims**